

CITY OF CHURCH HILL P O BOX 366 CHURCH HILL, TN 37642

April 12, 2017

Re: Semi-annual Pretreatment Report

Dear Robert,

Enclosed, please find a copy of the Semi-annual Pretreatment Report from the City of Church Hill. This report covers the time period of October 1, 2016 thru March 31, 2017.

If there are any questions or if I can be of any further assistance concerning this matter please feel free to contact me at (423) 329-9380

Sincerely,

Sandy Renner

Pretreatment Coordinator City of Church Hill



Tennessee Department of Environment and Conservation ECEIVED Division of Water Resources 401 Church Street, 6th Floor L & C Annex Nashville, TN 37243-1534 (615) 532-0625

APR 1 7 2017

JOHNSON CITY ENV. FIELD OFFICE

CONTROL AUTHORITY PRETREATMENT SEMI-ANNUAL/ANNUAL REPORT

Control Authority Identification:						
Control Authority Name:	CITY	OF CHU	JRCH HILL			
Report Date:	4/12/17					140 110 2 2 4 110 144
Reporting Period Covered by this report	From 10/1/16		6	То	3/31	/17
Reporting Period Covered by previous report	From 4/1/16			То	9/30)/16
Name of Wastewater Treatment Plan	nt(s)		NPDES Permit N	No.		
1. CITY OF CHURCH HILL WWTP			TN0021253			
2.						
3.						
4.						
5.						
Person to contact concerning this rep	ort:		Title or Position: PRETREATME		ORDINA	ATOR
Mailing Address: 500 S ALLENS BRIDGE RD			City: GREENEVILLE		State:	Zip: 37743
Phone number(s): 423-329-9380			E-mail (optional skrenner2001@y		om	
Fax number (optional):			Website (optiona	al):		
Report Certification: (must be signed "I certify under penalty of law that this d accordance with a system designed to assu Based on my inquiry of the person(s) who submitted information is to the best of m significant penalties for submitting false violations. A false statement is subject to the significant penaltics for submitting false violations.	ocument are that quant or manage the knowledge information	nd all atta lified person he system ge and be on, include	achments were prepare sonnel properly gather or are directly respo- lief, true, accurate, and ling the possibility of	ed under and eval nsible for ad comple	my directuate the integrate of the direction of the direc	tion or supervision in information submitted. g the information, the n aware that there are
Name: (print or type) SANDY RENNER			Title: (print or ty PRETREATME		ORDIN	ATOR

Report Date:		TN0021253
Signature: /	Date: / /	
A mily 1 P.mer	4/12/17	

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TN0021253

Pretreatment – Narrative Summary

Walker Forge changed ownership and changed the name to Bharat Forge PMT Technologie, LLC as of December 15, 2016. A new IU permit was issued and there are no process changes at this time, if and when there are, Bharat will notify the City of Church Hill.

Cooper Standard Automotive Building "B" is now classified as a Zero Discharge User, as of 12/15/16. This building is only a warehouse for storage. A new IU permit was issued and if there are changes in the future, they will notify the City of Church Hill.

Water usage for IU's on the average is lower for this reporting period compared to reporting period 4/1/16 through 9/30/16, possibly due to seasonal production.

Cooper Standard and Techni-Glass have new IU contacts noted on Form 3 IU Summary.



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Form 1a

Results of Sampling at Control Authority

Sample Date(s): 10/20/16 1/20/17

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Column 1	Column 2	Column 3	Column 4	Column 5	Column (
Parameter	Influent (mg/l)	Protection criteria (mg/l)	Effluent (mg/l)	Pass Through Limit (mg/l)	Removal Rate (%)
Copper (Cu)	0.02765	0.432	0.00922	0.08	66.65
Chromium III	0.00163	0.01	< 0.0010	0.01	-0-
Chromium VI	< 0.000500	0.01	< 0.000500	0.01	-0-
Chromium Total	0.00163	0.183	< 0.00105	0.06	35.58
Nickel (Ni)	0.00284	0.2727	0.00196	0.18	30.99
Cadmium (Cd)	< 0.00100	0.03	< 0.00105	0.005	-0-
Lead (Pb)	0.001325	0.216	< 0.0010	0.045	24.53
Mercury (Hg)	<0.000200	0.00166	< 0.0002	0.0004	-0-
Silver (Ag)	<0.00100	0.006	< 0.0010	0.005	-0-
Zinc (Zn)	0.2325	0.5917	0.06295	0.2	72.92
Cyanide (Cn)	0.0105	0.26	< 0.0050	0.23	52.38
Phenols, Total	0.07345	0.11627	< 0.0400	0.05	45.54
Toluene	< 0.0050	0.375	< 0.0050	0.015	-0-
Benzene	<0.0010	0.019	< 0.0010	0.0030	-0-
1,1,1-trichloroethane	< 0.0010	0.25	< 0.0010	0.03	-()-
Ethylbenzene	< 0.0010	0.04	< 0.0010	0.004	-0-
Carbon tetrachloride	<0.0010	0.015	< 0.0010	0.015	-0-
Chloroform	< 0.0050	0.223	< 0.0050	0.085	-0-
Tetrachloroethylene	<0.0010	0.13888	< 0.0010	0.025	-0-
Trichloroethylene	<0.0010	0.1	< 0.0010	0.01	-0-
1,2 trans dichloroethylene	<0.0010	0.0075	<0.0010	0.0015	-0-
Methylene chloride	< 0.0050	0.09615	< 0.0050	0.05	-0-
Naphthalene	<0.0010	0.0125	< 0.0010	0.001	-0-
Total phthalates	<0.012	0.116	<0.0012	0.0645	-0-

Include any parameters sampled in the reporting period including the routine semiannual sampling as well as the effluent sampling specified in Section III of the National Pollution Discharge Elimination System (NPDES) permit, including applicable toxic organics (i.e., toluene, benzene, 1,1,1 – trichloroethane and chloroform).

You must sample for all parameters in your NPDES Permit at the required frequency (See Part 3 of your NPDES permit for required pretreatment monitoring).

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Form 1b **Biosolids**

What does the Control Authority do with the sludge/biosolids? LAND APPLY

If biosolids are land-applied, please fill out the following Table.

Parameter	Biosolids Concentration (mg/kg)	503 Table 1 limits Ceiling Concentration (mg/kg)	503 Table 3 limits Monthly Ave. (mg/kg)
Arsenic	25.2	75	41
Cadmium	1.05	85	39
Copper	315	4300	1500
Lead	23.6	840	300
Mercury	0.533	57	17
Molybdenum	12.8	75	N/A
Nickel	12.5	420	420
Selenium	9.45	100	100
Zinc	1012.5	7500	2800

Were there any samples of biosolids that exceeded the ceiling concentrations from 40 CFR Part 503 (Table 1)? NO

What date(s)? N/A

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Form 2 Report of Upsets, Protection Criteria Violations, Biosolids Violations and Pass-Through Limit Violations

Type of Incident	Date	Explanation of Incidents	Corrective Action Taken
none			
		E E	
			2
			ALL STREET SCHOOL STREET
4			
	Ji Jian I		

^{*} Give a detailed explanation of the causes of the incident and the corrective action taken to date. The corrective action should also include any plans the Control Authority has to identify or correct the problem. If there is not enough room on this form, include the information in the Narrative Summary.



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Form 3

Industrial User Summary

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	Industrial User Sun	mary ENV. FIELD OF	FICE
Industrial User Name and Mailing Address	Contact (indicate Mr./Ms.) Phone #/Fax# and email address (optional)	Type of Industry **	Actual Flow (GPD)
CONTOUR GLASS	DAVID TOMLINSON 423-345-2000 dtomlinson@contourind.com	SN	11,403
COOPER STANDARD AUTOMOTIVE A BLDG 377 PHIPPS BEND ROAD SURGOINSVILLE,TN 37873	ANGEL VICARS 423-345-5337 angel.vicars@cooperstandard. com	CIU Iron & Steel 40 CFR 420	36,847
COOPER STANDARD AUTOMOTIVE B BLDG 377 PHIPPS BEND ROAD SURGOINSVILLE,TN 37873	ANGEL VICARS 423-345-5337 angel.vicars@cooperstandard. com	CIU -0- DISCHARGE	228
FROG PROPERTIES 121 KINGSPORT PRESS RD CHURCH HILL,TN 37642	BLU CASTLE	NCIU WAREHOUSE	6,926
HUTCHINSON SEALING SYSTEMS 309 PRESS ROAD CHURCH HILL, TN 37642	JOHNNY EVANS 423-357-6991	CIU -0- DISCHARGE	18,615
DALTON STAMP & DIE 930 PHIPPS BEND ROAD SURGOINSVILLE, TN 37873	MICHAEL ANDREWS 423-345-4477 daltonstamp@aol.com	CIU 40 CFR 433.17 (a)	454
HOMELAND VINYL PRODUCTS 140 INDUSTRIAL DRIVE SURGOINSVILLE, TN 37873	ROBBIE BAILEY 423-345-2351	SN -0- DISCHARGE	92
MIS INC 119 INDUSTRIAL DR SURGOINSVILLE, TN 37873	GARY KILPARICK 423-345-2303	SN	1,406

Report Date: TN0021253

TABCO INC 950 PHIPPS BEND RD SURGOINSVILLE, TN 37873	TONY BARTON 423-345-2299	CIU METAL FINISHING 40 CFR 433.17 (a)	3,068
TECHNI GLASS INC 916 PHIPPS BEND RD SURGOINSVILLE, TN 37873	ISAAC OVERBAY 423-345-4527 ioverbay@techni- glassinc.com	SN	8,935
BHARAT FORGE PMT TECHNOLOGIE, LLC 2105 SEHMIEDE ST SURGOINSVILLE, TN	DOUG CHAPPELL 423-345-1019	CIU NEW SOURCE Iron & Steel 40 CFR 420 Subpart G	19,829

**If a Significant Industrial User (SIU) is Categorical, list the applicable category (i.e., metal finisher, electroplater, leather tanner, etc.). Non-categorical SIUs should be listed as SN (Significant Non-Categorical), with a description of the process (i.e., SN-landfill or SN-hospital). All Non-significant Categorical Industrial Users (NSCIU) should be listed on the form and identified as an NSCIU. Information on NSCIUs is required on Form 3, but not required on any other form in this report. Industries that are not significant and not categorical are not required to be listed in this report. However, if you wish to list them on this form, please identify them as "Other."

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Form 4

JOHNSON CITY ENV. FIELD OFFICE

		Form 4	ENV. FIELD OFFICE	E
40	Industrial Us	ser Monitoring	Report	
Column 1	Column 2	Column 3	Column 4	Column 5
Industrial User Name and Mailing Address	Control Authority Inspection Date(s)	Control Authority Sampling Frequency	Control Authority Sampling Date(s)	SIU Self- Monitoring Dates(s)
CONTOUR GLASS	5/10/16	1/12 MONTHS	10/19/16	10/18/16 1/10/17
COOPER STANDARD A BLDG	11/10/16	1/12MONTHS	11/9/16	11/8/16 1/11/17
COOPER STANDARD B BLDG	11/10/16	1/12MONTHS	11/9/16	11/8/16
FROG PROPERTIES	5/10/16	1/12 MONTHS	10/18/16	10/4/16 12/20/16 2/16/17
HUTCHINSON SEALING	1/5/17	1/12 MONTHS	10/18/16	NOT REQUIRED
DALTON STAMP & DIE	1/5/17	1/12 MONTHS	3/20/17	3/21/17
HOMELAND VINYL PRODUCTS	5/10/16	1/12 MONTHS	10/18/16	NOT REQUIRED
MIS INC	1/5/17	1/12 MONTHS	10/19/16	10/18/16
TABCO INC	5/10/16	1/12 MONTHS	2/22/17	2/21/17
TECHNI GLASS INC	1/5/17	1/12 MONTHS	10/19/16	10/18/16
BHARAT FORGE PMT TECHNOLOGIE,	12/13/16	1/12 MONTHS	10/19/16	10/18/16 1/11/17

TN0021253
t Date:

Industrial User Compliance Report Form 5b

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TRC (Yes o No) no no no no October - March Column 6 (Yes or No) Chronic Viol. no no no TRC Viol. (Yes or No) July - December no no no no Column 5 (Yes or No) Chronic Viol. 2017) 0U no 110 no Semi-annual reporters only must complete this form
(For semi-annual reporting period October 1, 2016– March 31

Column 3

Column 4 Samples Total Number Jan - March of Parameters Total Violated (conc/limit) 0 0 0 of Samples Total Number October - December (conc/limit) Parameters Total Violated Number of Samples July - September Total Column 2 Parameters Violated (conc/limit) 0 0 0 0 Industrial User Column 1

be one line for each parameter for each SIU with violations, showing whether a Technical Review Criteria (TRC) or Chronic clation resulted: Yes for violations resulting in TRC or Chronic – both are Significant Non-Compliance (SNC) or No for vlations not resulting in TRC/Chronic Violations. Please note that monthly average and daily maximum for a specific rameter are considered to be separate limitations. Therefore, SNC would be calculated separately for each limitation. onc" stands for concentration.

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Report	Date:
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Form 6

Enforcement and Compliance					
Industrial User	Verbal Warnings (1) (Enter	Notice of Violation (Enter	Compliance Schedule Conformity (2)	Administrative Orders (Enter Number)	Number of Violations Resolved
none	Number)	Number)			
	F.				
		<u> </u>			
×					
					1

- 1 Verbal warnings include phone calls and site visit discussions.

2 Use the following code:
In compliance with schedule = Yes
Out of compliance with schedule = No
Facility not on a schedule = NA

Note: Describe compliance schedule in a footnote or in the Narrative Summary, giving the date issued, the violation and due dates for major milestones.

Control Authority Name: CITY OF CHURCH HILL

TN0021253

Form 7 Pretreatment Performance Summary

I. General Information

Control Authority Name: CITY OF CHURCH HILL

Address: 500 S ALLENS BRI	DGE RD	City: GREENEVILLE, TN 37743		
Contact Person: SANDY REM	NNER	Contact Phone Number: 423-329-9380		
Reporting Period: 10/1/16 to 3/31/17		NPDES Number: TN0021253		
Number of Categorical SIUs: Number of Non-Categorical SIUs:		Total Number of SIUs:		
5	6	11		

II.	Significant Industrial Compliance	SIUs		
		Categorical	Non- Categorical	
1)	No. of SIUs in Significant Non-compliance (SNC)			
2)	Reasons for Significant Non-compliance (SNC)			
	a) In SNC for Violations of pretreatment standards			
	b) In SNC for Reporting Violations			
	c) In SNC for Compliance Schedule Violations			
	d) In SNC for Other (explain in Narrative Summary)			

III.	Monitoring		SIUs
1)	Facilities Monitored by CA (samples analyzed for all SIU permit parameters):	Categorical	Non- Categorical
	a) No. of SIUs Sampled by the Control Authority (CA)	5	6
	b) No. of SIUs Inspected by the CA		
2)	Total Monitoring Events:		
	a) No. of Samples by the CA	5	6
	b) No. of Inspections by the CA		
3)	How many SIUs do not have a current control mechanism (permit)	0	0

IV.	Enforcement	SIUs		
		Categorical	Non- Categorical	
1)	SIUs Subject to Any Enforcement Actions (include verbal warnings	0	0	
2)	SIUs Listed in the Newspaper for SNC in this period	0	0	
3)	Notices of Violations Issued *	0	0	
4)	Administrative Orders Issued *	0	0	
5)	No. of SIUs on Compliance Schedules (anytime in period)	0	0	
6)	Suits Filed:			
	a) Civil Suits *	0	0	
	b) Criminal Suits *	0	0	
7)	Other Actions Taken (sewer bans, etc. but not verbals) *	0	0	
8)	Penalties Collected: (not surcharges)			
	a) No of SILIs from whom penalties were collected	0	0	

Report Date: TN0021253

1					
b)	Total Dollars (\$) collected in t	ne period	0	0
		*	Enter the number of ACTIONS, not the	number of SIUs	